

U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT BUREAU FOR DEMOCRACY, CONFLICT, AND HUMANITARIAN ASSISTANCE (DCHA) OFFICE OF U.S. FOREIGN DISASTER ASSISTANCE (OFDA)

LIBERIA - Complex Emergency

Situation Report #6, Fiscal Year (FY) 2003

August 13, 2003

Note: The last Liberia Situation Report was dated August 8, 2003.

BACKGROUND

Liberia has been marked by intermittent civil war since Charles Taylor launched a rebellion against the military regime of Samuel Doe in 1989. More than 200,000 people were killed during the ongoing conflict in Liberia in the 1990s. In 1997, Taylor emerged the dominant power, winning the 1997 presidential election. Two opposition groups, controlling between 60 and 80 percent of the country, launched attacks on Government of Liberia (GOL) forces in attempts to oust Taylor from power, until his resignation on August 11, 2003. The main opposition group, Liberians United for Reconciliation and Democracy (LURD), which began to fight former President Taylor in 1999, has grown from a northern-based insurgent movement to a force that now controls the majority of the country. The second opposition group, the Movement for Democracy in Liberia (MODEL), based in southern Liberia, began incursions into Liberia from Côte d'Ivoire in April 2003, resulting in large-scale population displacement. Years of conflict have had devastating consequences for the humanitarian situation in Liberia. The country is currently ranked 174 out of 175 by the United Nations (U.N.) World Human Development Index, which measures health and living conditions.

NUMBERS AT A GLANCE		SOURCE	
Internally	Total : 500,000-600,000 in Liberia		
Displaced	150,000 – IDP camps and irregular settlements in Monrovia	UN OCHA and NGOs, July 2003	
	200,000-300,000 – Unidentified locations in Monrovia	UN OCHA and NGOs, July 2003	
	160,000 – Outside of Monrovia	European Commission, July 2003	
Refugees	70,000 Liberians in Guinea	UNHCR, July 2003	
	53,000 Liberians in Sierra Leone	UNHCR, June 2003	
	50,000 Liberians in Côte d'Ivoire	USCR, August 2003	
	35,000 Ivorians in Liberia	UNHCR, July 2003	
	14,000 Sierra Leoneans in Liberia	UNHCR, July 2003	

CURRENT SITUATION (Updated weekly)

LURD offensive in Monrovia. On July 19, following the complete breakdown of a June 17 cease-fire agreement, Liberians United for Reconciliation and Democracy (LURD) launched its third major offensive since June in Monrovia, the capital city of Liberia. Heavy fighting between LURD and Government of Liberia (GOL) forces continued in and around Monrovia following the July 19 attack, as LURD gained control of strategic areas of the city, including Bushrod Island and the Free Port of Monrovia. Unconfirmed media reports estimate that the most recent outbreak of the fighting has killed approximately 1,000 people.

Deployment of ECOWAS troops. On August 4, the first troops of the Nigerian battalion, the vanguard of a promised 3,250-troop Economic Community of West

African States (ECOWAS) force, began to arrive at Roberts International Airport (RIA), located 50 km east of Monrovia. Since the arrival of the troops, fighting has significantly abated in the capital. On August 7, more than 100 Nigerian troops entered Monrovia and began to conduct patrols. A U.N. force is expected to eventually replace the ECOWAS force.

Resignation of former President Taylor. On August 11, former President Taylor resigned from office, transferred power to Moses Blah, Taylor's former Vice President, and departed the country shortly afterwards for exile in Nigeria. In October 2003, President Blah will reportedly transfer power to an interim administration, whose members are being appointed at the ongoing peace negotiations in Accra, Ghana. On August 12, LURD expressed for the first time its interest in leading the interim administration. LURD had previously indicated

that its primary concern was the removal of former President Taylor from office.

U.S. Government troop deployment. The U.S. Government (USG) has positioned 2,300 U.S. troops off the coast of Liberia to assist the ECOWAS peace-keeping troops. The USG has authorized six to 20 Marines to go ashore to provide logistical support as needed for the ECOWAS mission in Liberia.

Continuing fighting outside of Monrovia. Although Monrovia has remained relatively quiet since the arrival of the peace-keeping troops, news reports indicate that on August 8, LURD forces took control of Gbarnga, one of former President's Taylor's strongholds in Bong County, after a battle with GOL forces lasting several days. LURD forces have also reportedly advanced from Gbarnga to Ganta in Nimba County.

EMERGING ISSUES

Fighting and IDP Movements in the Harbel area. On August 11, the Movement for Democracy in Liberia (MODEL) indicated that it did not consider the war over despite Taylor's resignation. On August 12, news reports indicated that fighting erupted near Harbel, located within the Firestone rubber plantation, as MODEL forces advanced to a few miles away from RIA. According to Oxfam on August 12, GOL militia are looting near Harbel and have caused panic among the local population. The proximity of the fighting to RIA is a significant concern, given that the airport has been the port of entry for humanitarian and ECOWAS airlifts and operations in recent days.

The fighting near Harbel has caused internally displaced person (IDP) movements in and around the area. News reports on August 12 indicated that IDPs who had previously fled to Harbel to escape the fighting in Monrovia departed from Harbel to avoid the recent outbreak of fighting between MODEL and the GOL. Civilian populations are also reportedly moving towards RIA to escape the fighting.

Access to IDPs in Buchanan. Fighting has continued in the port city of Buchanan, Liberia's second most populated city located 120 km southeast of Monrovia, between MODEL and GOL forces since MODEL launched an attack there on July 28. According to an August 8 U.S. Committee for Refugees (USCR) report, MODEL now controls most of eastern Liberia, including Sinoe, Grand Gedeh, Grand Kru, River Gee, and Maryland counties, and has rear bases in western Côte d'Ivoire.

According to the USAID/OFDA Disaster Assistance Response Team (DART) currently in Monrovia, approximately 8,000 to 10,000 IDPs in Buchanan are in

need of immediate food assistance. The United Nations Office for the Coordination of Humanitarian Affairs (UN OCHA) reported on August 8 that civilians fleeing the fighting in Buchanan face severe food and water shortages and lack adequate shelter and sanitation. Diarrhea is reportedly prevalent, especially among women and children.

Access to the Free Port of Monrovia. On August 12, LURD signed a pledge to surrender control of the Free Port of Monrovia on August 14 to ECOWAS peace-keeping troops. Humanitarian organizations anticipate that control of the port by peace-keeping troops will allow distribution of food stocks and relief supplies throughout the city, and permit deliveries of relief commodities by ship into the port.

RESUMPTION OF HUMANITARIAN OPERATIONS

Deployment of relief supplies and personnel. The August 4 deployment of the initial Nigerian battalion marked a decrease in small arms fire and mortar fire in Monrovia, allowing for renewed humanitarian operations and greater freedom of movement among the population. Several non-governmental organizations (NGOs), including Save the Children Fund (SCF)-U.K., Médecins Sans Frontières (MSF)-France, the International Committee of the Red Cross (ICRC), and the U.N. World Food Program (WFP), airlifted commodities into RIA during the week of August 4.

World Vision reported on August 8 that it has positioned approximately \$480,000 worth of relief supplies, including blankets, cooking sets, soap, mosquito netting, and plastic sheeting, for delivery into Monrovia once the Free Port is secured.

On August 11, a U.N. Advance Team departed Abidjan for Monrovia to prepare for resumption of operations in Liberia. On August 12, the U.N. Deputy Emergency Relief Coordinator, accompanied by other U.N. staff, traveled to Monrovia to meet with ECOWAS, USG officials, and humanitarian organizations. Ten U.N. staff will remain in Monrovia.

Oxfam, with partial funding from USAID/OFDA, will fly a plane with \$144,000 worth of relief supplies and equipment to Liberia on August 13 to allow the organization to rapidly augment operations. The equipment will include water tanks, pumps, pipes and taps, blankets, and mosquito nets.

The U.N. Children's Fund (UNICEF) reported that it will charter relief supplies, including water tanks, water purifiers, soap, emergency kits, office supplies, and nutritional commodities, on August 13 to Liberia.

Increased NGO access in LURD-controlled areas. On August 8, ICRC and MSF entered the LURD-controlled northern zone of Monrovia with the permission of LURD, marking the first time that humanitarian organizations were able to access the area since the outbreak of fighting on July 19. The ICRC and MSF team of doctors, nurses, and logisticians assessed the humanitarian situation and visited five makeshift clinics in the area. The team also provided medical supplies, including intravenous infusions and enough drugs to treat 2,000 people for three months.

NUTRITION

Action Against Hunger (ACF) screening and operations. USAID/OFDA implementing partner ACF reported that its assessments conducted among more than 6,000 children under five in Monrovia have shown that approximately 30 percent of screened children are suffering from acute malnutrition. Screenings carried out between June 10 and July 31 in three phases in different parts of the capital indicated that 1,965 children were suffering from acute malnutrition (308 from severe and 1,657 from moderate acute malnutrition) out of 6,536 children screened. Although not statistically representative of the overall situation in Monrovia, the figures point to a nutritional situation of serious concern, ACF indicated.

MSF nutritional screening and operations. According to international media reports, MSF-France screened 1,670 children at Salala IDP camp in Bong County, north of Monrovia, and found that 20 percent of the children screened were moderately malnourished, while slightly more than two percent were severely malnourished. Approximately 20,000 to 25,000 people displaced by fighting in northern Liberia have sought refuge in the Salala IDP camp since May.

In Bong County, MSF continues to offer medical care to more than 60,000 IDPs in three camps. MSF reported on August 8 that during the week of August 4, it measured a degradation in the nutritional situation. MSF is starting therapeutic feeding for 65 severely malnourished children in the camps where food has not been distributed since May. On August 6, MSF dispatched a truck with nutritional materials, including high-protein biscuits, to the Salala IDP camp.

According to the USAID/OFDA DART, between August 8 and August 10, MSF-Holland staff vaccinated 600 children on the Greystone compound for measles and conducted a nutritional screening. On the first day of screening, fewer children than anticipated came to the clinic, which might indicate that families are leaving the compound for their homes or other locations as security permits. On August 8, three of the approximately 100 children screened were severely malnourished. The three

children were referred to the therapeutic feeding centers managed by ACF, which operates therapeutic and supplementary feeding centers in Greystone and a number of other sites in Monrovia, with partial funding from USAID/OFDA.

SCF-U.K. food security assessment. According to the USAID/OFDA DART, SCF-U.K. is conducting an emergency food security assessment aimed at identifying the most vulnerable children in Monrovia who require immediate distribution of high-energy biscuits. Once identified, SCF-U.K. will distribute approximately 5 MT of biscuits that it shipped to RIA on August 4.

FUEL

Continued fuel shortages. According to the USAID/OFDA DART, NGOs have voiced concern that they may have to discontinue water distributions due to the fuel shortage. ACF reported on August 9 that it had a two-week supply of diesel fuel remaining. NGOs report that fuel is significantly more expensive than prior to the outbreak of fighting, and is often unavailable for purchase. In the coming days, SCF-U.K. is planning to fly approximately 2,000 liters of diesel fuel into Monrovia. Other NGOs are also planning to transport diesel fuel based on needs. According to the USAID/OFDA DART, fuel is available in the Free Port, which may be accessible once security is guaranteed.

SECURITY

Ongoing security concerns. Although the decrease in fighting afforded by the troop deployment has stabilized the situation in Monrovia, security remains a basic issue in Liberia. According to U.S. Embassy sources in Monrovia, humanitarian organizations have expressed willingness to provide assistance to affected populations and conduct distributions of relief commodities; however, they are unable to do so without basic security for the area surrounding the White Plains pumping station, the Free Port of Monrovia, and other facilities in greater Monrovia.

According to UN OCHA, looting, rape, intimidation and harassment of residents by both GOL and opposition forces are common. NGOs report that rape is prevalent and is typically under-reported due to fear of harassment and stigma associated with the victim. Looting and vandalization of assets and offices have compromised the ability of humanitarian agencies to respond appropriately to the needs of IDPs. More than 30 vehicles belonging to U.N. agencies and NGOs have been looted since fighting between LURD and GOL forces began in June 2003.

According to the USAID/OFDA DART, GOL militia vandalized Merlin's clinic at Newport Street on August 11. Merlin's security guard was beaten and some items were taken, including high-energy biscuits and blood

pressure cuffs. Merlin also reported hearing sporadic gunfire near Mamba Point during the night of August 10.

DISPLACED POPULATIONS

Estimates of IDP populations. Due to the current level of insecurity and constant flux of IDP movements in and around Monrovia and Buchanan since July 19, humanitarian organizations have not been able to develop reliable and consistent estimates of IDP populations. Current estimates of IDPs in camps, irregular settlements, and unidentified locations in Monrovia range from 250,000 to 450,000 people. The total population of Monrovia is now estimated to be 1.3 million people. Prior to the July 19 outbreak of fighting, combined estimates from UN OCHA and NGOs in Liberia indicated that approximately 600,000 Liberians are currently displaced as a result of the ongoing civil war.

IDP population at Greystone. According to the USAID/OFDA DART, the number of IDPs at Greystone has continued to decrease, with current estimates of approximately 3,000 people remaining. The decline may be due to the decrease in gunfire and mortar attacks in the Mamba Point area since August 4.

IDP conditions outside of Monrovia. WFP and other NGOs have reported that IDP camps outside of Monrovia and the surrounding area have been inaccessible since June, and the humanitarian situation there is expected to be catastrophic. LURD and MODEL forces occupy approximately 80 percent of the country, and fighting has reportedly continued in some areas, despite the informal truce that has held since August 4.

REFUGEES

Repatriation of Sierra Leonean refugees. On August 12, the U.N. High Commissioner for Refugees (UNHCR) indicated that its Motor Vessel (MV) Overbeck will arrive in the Free Port of Monrovia on August 15 to resume the repatriation of Sierra Leonean refugees from Monrovia. From July 4 to 20, the MV Overbeck conducted evacuations of Sierra Leonean refugees from Monrovia to Freetown, Sierra Leone, but suspended operations on July 21 because it was unable to dock safely in Monrovia.

On its return to Monrovia, the MV Overbeck will transport fuel, food, and relief supplies, including blankets, mats, plastic sheeting, and soap, to support approximately 7,000 people.

Increased flow of Liberian refugees into Côte d'Ivoire. UNHCR has reported that refugees from Liberia continue to arrive on a daily basis in the southwestern part of Côte d'Ivoire. An estimated 40,000 Liberian refugees have arrived in Côte d'Ivoire since May. There have also been large population movements from Liberia into Danané, a

border town in Côte d'Ivoire, due to fighting between GOL and MODEL forces in Butuo and Tweh towns in Nimba County.

According to an August 8 USCR report, approximately 30,000 Liberian refugees displaced by the current conflict are in dire need of emergency humanitarian assistance in Côte d'Ivoire along a 300-mile corridor near the Côte d'Ivoire-Liberia border. Lack of security in the region and proximity to the border have left thousands of Liberian refugees living in western Côte d'Ivoire unprotected and without basic emergency humanitarian assistance, USCR stated.

WATER AND SANITATION

Lack of potable water. NGOs report that supplies of potable water have been exhausted in most parts of Monrovia. UNHCR reported that due to the prevailing rainy season, the water yield in most of Monrovia's deep wells has increased. However, the water is in need of chlorination. UN OCHA and NGOs report that the majority of IDPs are using water from potentially contaminated sources such as surface water and dilapidated wells, increasing fears that cholera and other water-borne diseases are likely to spread rapidly. Although people have been able to collect some rainwater, storage containers are in short supply.

Damage to White Plains pumping station. On July 21, mortar fire damaged the White Plains pumping station, which is the primary supply of clean water for Monrovia, including IDP camps. Since July 30, the European Commission (EC), which supports the White Plains facility, has conducted damage assessments of the pumping station. However, the EC reported that continued harassment, including demands for money, by competing groups in the area has hindered the assessments. Long-term security is needed for the repair and operation of the White Plains station.

Continued water trucking operations. Merlin, ACF, Oxfam, ICRC, and the EC continue to operate water distribution trucks on an intermittent basis as dictated by the security situation. ICRC reported on August 8 that it is providing 100,000 liters of water per day at 20 IDP settlements in Mamba Point, central Monrovia, Sinkor, Congo town, Paynesville, and Harbel. In some of these centers, ICRC is also supplying shelter materials and constructing latrines.

USAID/OFDA implementing partner ACF has distributed water to IDP sites throughout central Monrovia, constructed latrines at Samuel K. Doe (SKD) Stadium, and chlorinated wells throughout Monrovia. ACF reported on August 4 that it began distributing 100,000 liters of water per day to four IDP centers at Crawford,

Gibson, and Tubman High Schools, and Johnson Street in Monrovia.

Oxfam, through USAID/OFDA funding, has delivered water to refill two 10,000-liter bladders at SKD Stadium and 20,000 liters of water per day to IDPs at the International School, which currently houses between 3,000 and 4,000 IDPs. Oxfam is also building two blocks of latrines at SKD Stadium and distributing soap to a number of IDP sites. Oxfam has constructed bath houses at the U.N. Development Program (UNDP) compound where IDPs are taking shelter.

Oxfam provides 55,000 liters of water per day to the Salala IDP camp and has distributed soap, buckets, and jerry cans for 2,000 families. The organization plans to increase water access at the Salala camp by establishing a more permanent water source and increasing the number of latrines and bath houses.

Refuse collections in Monrovia. According to the USAID/OFDA DART, several humanitarian organizations, including ICRC, have begun needed garbage collection in Monrovia. The European Union has certified an official site near Sinkor to offload the collected refuse. This has improved sanitation conditions in a number of IDP sites.

HEALTH

ICRC surgical unit at JFK Hospital. ICRC reported on August 8 that in the last two months, its surgery unit at John F. Kennedy (JFK) Memorial Hospital has treated more than 1,500 patients and performed more than 1,000 surgical operations. The Chief Medical Officer at JFK Hospital reported that the situation is desperate due to the high number of patients, and the lack of accommodations and food stocks for patients. The unit performs approximately 25 to 30 operations a day, and is currently treating approximately 250 war-wounded patients. Due to price increases, ICRC is flying in approximately 800 kg of rice per week from Freetown in order to feed patients. ICRC also provides fuel and water to the hospital.

Merlin operations. According to the USAID/OFDA DART, Merlin's outpatient clinic at Greystone has provided treatment over the past several weeks for war wounded in and around Greystone. Merlin also continues to operate an ambulance service to transport the most critically wounded to JFK Hospital.

NGO operations at SKD Stadium. Several NGOs continue to provide medical supplies and assistance at SKD Stadium. World Vision reported on August 8 that it has continued to supply medicines and measles vaccines to a health clinic at SKD Stadium. MSF staff continue to provide medical care, cholera treatment, and water in the

SKD Stadium, where it conducts approximately 250 consultations per day. According to the USAID/OFDA DART, MSF's 47-bed cholera treatment unit had 18 patients, as of August 11. USAID/OFDA-funded NGO Merlin operates a health clinic at SKD Stadium, providing health care services for up to 200 people per day.

Health conditions outside of Monrovia. NGOs have expressed concern over the lack of information regarding health conditions outside of Monrovia where little or no medical care is available. MSF has reported that the health status of Liberians in more than 75 percent of the country remains unknown.

Preservation of National Drug Service vaccines. Fuel is also a critical issue for the preservation of Liberia's National Drug Service vaccines. ICRC has agreed to provide diesel fuel temporarily to prevent damage to the World Health Organization (WHO)-donated vaccines. Once the provision of ICRC fuel ends, additional fuel will be needed to keep the cold chain constant.

INFECTIOUS DISEASES

Malaria top health concern. According to the USAID/OFDA DART, NGOs report that the major medical conditions (other than trauma) in the order of incidence are malaria, acute respiratory infections (ARIs), diarrheal diseases, conjunctivitis, and dermatological conditions such as scabies. Several NGOs have begun measles vaccination programs and continue to provide cholera treatment.

Most IDPs living in established shelters or irregular settlements face serious shortages of potable drinking water, sanitation facilities, and food. Access to potable water has been severely compromised by the inoperative status of the White Plains pumping station. This situation has led to outbreaks of severe diarrheal disease and increases in the rate of malnutrition, particularly among children under age five. Oxfam stated on August 13 that there are reports of two or three deaths daily at Salala IDP camp due to diarrhea and other water-borne diseases.

Responses to cholera. MSF reported on August 8 that prior to the outbreak of fighting in mid-July, MSF was treating approximately 350 cholera patients per week. MSF indicated that its current cholera caseload is much lower than that during this peak season. MSF indicated that it is impossible to measure the extent of cholera in Monrovia, as fighting has limited access to cholera treatment centers. MSF speculated that the incidence of cholera is much higher than reported in Monrovia, and that many of the unreported cases of cholera are in the LURD-controlled areas of Clara Town and New Kru Town, west of Monrovia.

The USAID/OFDA-funded NGO Merlin, which operates a cholera treatment unit (CTU) and outpatient clinic (OPC) at Greystone, has also reported many fewer cholera cases than anticipated. On August 8, the CTU had 20 women and children and nine male patients in the facility with acute symptoms. On August 10, the number of patients in the CTU decreased to seven women and children and seven male patients.

Responses to measles. World Vision reported multiple cases of measles among IDPs in three separate locations in Monrovia. Measles and other infectious diseases continue to be a cause for concern because of the high population density among IDPs in Monrovia, the constant flux of IDP movements, the high prevalence of malnutrition in the absence of food distributions, the low immunization rate among children country-wide, and the deteriorating conditions in which IDPs live.

World Vision reported that on August 6 it used an ICRC van to transport measles vaccines provided by UNICEF to SKD Stadium, where World Vision implements a measles vaccination campaign.

According to the USAID/OFDA DART, USAID/OFDA implementing partner the International Rescue Committee (IRC) plans to begin measles vaccination program for 24,000 children between the ages of 6 months and 15 years in its two clinics, located in Paynesville.

Merlin plans to vaccinate children between the ages of 6 months and five years beginning on August 12 in Harbel, and to begin an Expanded Program of Immunization (EPI) in seven of its clinics.

Fuel shortage affecting healthcare services. NGOs cite the shortage of fuel, rather than vaccine and essential drug supplies, as the key constraint affecting the delivery of curative services within Monrovia. According to the USAID/OFDA DART, there are sufficient stocks of supplies for treating cholera, such as oral rehydration salts and antibiotics, within Liberia at present. Both MSF-Belgium and SCF-U.K. reportedly have stockpiles of cholera treatment kits in-country.

FOOD

Chronic food insecurity. Reports from humanitarian organizations indicate that there is chronic food insecurity among IDPs in Monrovia and the surrounding area. WFP has reported that at least 450,000 people in Monrovia face serious food shortages. WFP also indicated that malnutrition rates are rising in Monrovia, and that hundreds of thousands of people have not had adequate access to food since the most recent outbreak of fighting on July 19. Due to the extreme food shortage in GOL-controlled areas of Monrovia, residents are reportedly

turning to exceptional sources of food, such as wild leaves and roots and animals, including dogs.

Divergence in access to food. International media reports indicate that there is a marked divergence in access to food between some LURD-controlled areas and GOL-controlled areas. The news reports indicate that markets in LURD-controlled areas are well-stocked with food, including rice, chickens, and canned goods, at prices sometimes 20 times less than in areas under GOL control. Those living in LURD-controlled areas have benefited from LURD distributions or sales of rice looted from port warehouses, while food supplies have nearly been exhausted in GOL-controlled areas. However, news reports indicate that LURD-controlled areas have a comparatively greater need for medicine and proper medical care than GOL-controlled areas, although both face severe shortages.

WFP and USAID/FFP operations. WFP reported on August 8 that throughout June and July, it has been diverting incoming food shipments to Freetown, Sierra Leone and Conakry, Guinea. WFP reported that it currently has on reserve for Liberia 3,455 MT of food in Freetown and 2,935 MT in Conakry. According to WFP, this food can be reshipped to Monrovia if the security situation permits. WFP also reported that it will have an additional 7,000 MT of food in the region available for Liberia before November.

USAID/FFP reported that 15,700 MT of USAID/FFP food commodities are scheduled to arrive in the region at the end of August. These commodities are donated to WFP for the West Africa Coastal Protracted Relief and Recovery Operation (PRRO) that includes Sierra Leone, Guinea, and Liberia.

Since mid-July, WFP has had no access to its stocks in Monrovia and cannot confirm current levels. On August 9, a U.S. Embassy team visited the Free Port to assess the security situation and the status of WFP food stocks. The team reported that nearly all the buildings at the Free Port appear to have been looted to one degree or another. Many of the buildings were damaged by gunfire, and locks have been cut on all but two of the warehouses storing WFP food commodities and from half of the approximately 40 shipping containers. All of the rice and oil stocks appear to have been taken, but the bulgur wheat supplies remain relatively intact. Prior to the outbreak in fighting, WFP had positioned 8,000 MT of food in warehouses and 2,000 MT in containers in Monrovia's port, which is enough food to feed 250,000 people for three months.

WFP reported that the WFP-chartered supply ship—the Motor Vessel (MV) Seabulk Martin I—arrived off of the coast of Liberia from Abidjan on August 7. WFP

chartered the ship for an initial period of 60 days to function as a mobile office off the coast of Monrovia. WFP is awaiting possibilities for docking which can occur when peace-keepers have negotiated access to the port. Five WFP staff, one UNHCR staff, two UN OCHA staff, and two Oxfam staff, as well as three MT of high-energy biscuits and communications and logistics equipment, were aboard the ship. UNICEF, IRC, UN OCHA, UNHCR, and the WHO are also sending cargo composed of various items such as medicines.

Beginning on August 4, WFP airlifted an initial 12 MT of high-energy biscuits from Freetown to Monrovia. In addition, 41 MT of high-energy biscuits are earmarked for Liberia from Italy. The biscuits are being distributed by WFP and its implementing partners, including MSF, World Vision, SCF, ICRC, the United Methodist Committee on Relief (UMCOR), and Merlin, to approximately 100,000 vulnerable people in Monrovia, including thousands of IDPs who have established temporary camps near RIA.

USG HUMANITARIAN ASSISTANCE (New information is underlined.) Non-food Assistance

In FY 2003 to date, USAID/OFDA has provided more than \$2.7 million to support humanitarian needs in Liberia. USAID/OFDA provided more than \$517,000 to ACF in support of emergency nutrition needs in Monrovia and approved more than \$751,000 in funding to Merlin to address emergency health and water and sanitation needs throughout Liberia. USAID/OFDA approved more than \$616,000 in funding to IRC to support water and sanitation activities and the provision of non-food items to IDPs in Monrovia. USAID/OFDA approved more than \$330,000 in funding to Oxfam to support multi-sector IDP response activities in Monrovia. USAID/OFDA has approved funding for more than \$320,000 to UN OCHA to support coordination and protection of IDPs.

On August 6, a three-person USAID/OFDA Disaster Assistance Response Team (DART) arrived in Monrovia, Liberia. The DART had been in Freetown, Sierra Leone since July 20 due to the unstable security situation. While in Freetown, the DART met with implementing partners to discuss coordination of humanitarian assistance operations.

On August 12, an additional five DART members, including a USAID/FFP Officer, Water and Sanitation Officer, Logistics Officer, Communications Officer, and a Centers for Disease Control and Prevention (CDC) Epidemiologist, deployed to Monrovia.

Emergency Food Assistance

Including its latest \$10 million contribution provided in response to the U.N. Appeal, USAID/FFP has provided a total of 23,840 MT of P.L. 480 Title II emergency food assistance, valued at \$15.5 million, to Liberia. The commodities provided by USAID/FFP include a combination of cereals, pulses, and vegetable oil, and Corn Soya Blend for therapeutic and supplementary feeding. USAID/FFP emergency food assistance is provided to vulnerable populations through direct distribution, food for work programs, emergency school feeding, maternal and child health programs, and supplementary and therapeutic feeding programs. USAID/FFP programs are implemented in Liberia through WFP.

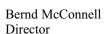
Refugee Assistance

The State Department's Bureau for Population, Refugees, and Migration (State/PRM) has provided support for Liberian refugees since 1989 and for Sierra Leonean refugees in Liberia since 1991. To date in FY 2003, State/PRM has provided more than \$1.8 million in assistance for refugees in Liberia through UNHCR and WFP. State/PRM has also provided nearly \$13 million to UNHCR and more than \$13 million to various NGOs to support Liberian refugees in Côte d'Ivoire, Guinea, and Sierra Leone. This is in addition to unearmarked funding for UNHCR for Africa (\$55.1 million) and ICRC for Africa (\$29.2 million).

U.S. GOVERNMENT HUMANITARIAN ASSISTANCE TO LIBERIA

Agency	Implementing Partner	Sector		Amount		
LIBERIA – FY 2003 (TO DATE)						
USAID Total						
USAID/OFDA\$2,760,572						
	ACF	Nutrition	Monrovia	\$517,773		
	Merlin	Health and Water/Sanitation	Country-wide	\$751,011		
	IRC	Water/Sanitation and non-food items	Monrovia	\$616,774		
	Oxfam	Multi-sector IDP response	Monrovia	\$330,662		
	UN OCHA ¹	Coordination and protection of IDPs	Monrovia	\$320,000		
	OFDA	Logistics and relief commodities	Monrovia	\$224,352		
USAID/FFP\$15,500,00						
	WFP	P.L. 480 Title II Food Assistance – 23,840	MT Country-wide	\$15,500,000		
STATE/PRM ²						
	UNHCR	Annual Refugee Operations	Country-wide	\$1,000,000		
	WFP	WFP Support	Country-wide	\$826,164		
TOTAL USG HUMANITARIAN ASSISTANCE TO LIBERIA IN FY 2003 (TO DATE)\$20,086,736						

¹ Funding is in process; award to be made shortly.



Office of U.S. Foreign Disaster Assistance

Public Donation Information

- The most effective way people can assist relief efforts is by making cash contributions to humanitarian organizations that are conducting relief operations. A list of humanitarian organizations that are accepting cash donations for their drought response efforts in Liberia can be found at http://www.interaction.org/liberia/index.html. Information on other organizations responding may be available at www.reliefweb.org.
- USAID encourages cash donations because they: allow aid professionals to procure the exact items needed (often in the affected region); reduce the burden on scarce resources (such as transportation routes, staff time, warehouse space, etc); can be transferred very quickly and without transportation costs; support the economy of the disaster-stricken region; ensure culturally, dietary, and environmentally appropriate assistance.
- More information on making donations and volunteering services can be found at:
 - http://www.usaid.gov/our work/humanitarian assistance/disaster assistance/help/index.html
 - The Center for International Disaster Information: www.cidi.org or 703-276-1914
 - InterAction: www.interaction.org → "Guide to Appropriate Giving"
- Information on relief activities of the humanitarian community can be found at www.reliefweb.org

² State/PRM figures include funding within Liberia. State/PRM also provides additional Africa-wide and regional assistance not reflected in this total. Please see the USG Humanitarian Assistance section for further details.